STATE OF FLORIDA APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

(Section 106.021(1), F.S.)

OF	F	CE	USE	ON	L٧

RCVD NOV 2'07

(PLEASE TYPE)	·					
CHECK APPROPRIATE BOX:						
Original Appointment Deputy Treasurer	Reappointment of Treasurer Secondary Depository					
Name of Candidate 1	. Address (include post office box or street, city, state, zip code)					
Tom Truex	4740 SW 72 Ave Davie , FL 33314					
Telephone (optional) 2. Party (Partisan candidates only) 3. Office (add district, circuit, group number) 1954) 792-6800 11 A 4405						
I have appointed the following person to act as my X Campaign Treasurer Deputy Treasurer						
4. Name of Treasurer or Deputy Treasurer						
5. Mailing Address (If post office box or drawer add street address) 4740 SW 72 Aw, David, FL 333/4 954-792-6800 7. City 8. County 9. State 10. Zip Code						
7. City 8. County Broward	9. State 10. Zip Code 333/4					
I have designated the following named bank as my X Primary Depository Secondary Depository						
11. Name of Bank 12. Street Address 2205 5 Vuiver Sity Driver						
13. City J 14. County Davice Broward	15. State 16. Zlp Code 33324					
17. Signature of Candidate Date 17. Signature of Candidate						
Campaign Treasurer's Acceptance of Appointment						
I,, do hereby accept the appointment as (Please Print or Type)						
Campaign Treasurer Deputy Treasurer for the campaign of,						
who is seeking nomination or election as a	/A candidate to the office of					
(Party) Mayor As a duly registered voter in Broward						
County, Florida, I am qualified to accept this appointment.						
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.						
11-2-7 X						
Date Signature of Campaign Treasurer or Deputy Treasurer						